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CONFIRMATION NO. 3430

<b>SERIAL NUMBER</b> 10/577,447	<b>FILING OR 371(c) DATE</b> 04/27/2006 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1633	<b>ATTORNEY DOCKET NO.</b> 2006_0649A
<b>APPLICANTS</b> Ikurou Maruyama, Kagoshima-shi, JAPAN; Kazuhiro Abeyama, Kagoshima-shi, JAPAN; Yasushi Yoshimoto, Kagoshima-shi, JAPAN;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/JP04/16354 10/28/2004				
<b>** FOREIGN APPLICATIONS *****</b> JAPAN 2003-366798 10/28/2003				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** 03/03/2007				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <input checked="" type="checkbox"/> yes <input type="checkbox"/> no		<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 11	<b>TOTAL CLAIMS</b> 4
Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>		<b>INDEPENDENT CLAIMS</b> 2		
<b>ADDRESS</b> 513				
<b>TITLE</b> Antitumor medicine				
<b>FILING FEE RECEIVED</b> 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	